



# Illinois Department of Revenue

## IL-5754 Statement by Person Receiving Gambling Winnings

### Who must complete this form?

You must complete Form IL-5754 if you receive payment of Illinois lottery or gambling winnings over \$1,000. This form provides a record of who received winnings and to whom the winnings are taxable. The payer will use this information to prepare Form W-2G.

### What if I need additional assistance?

If you need assistance, visit our web site at [tax.illinois.gov](http://tax.illinois.gov); call our Taxpayer Assistance Division at **1 800 732-8866** or **217 782-3336**; or call our TDD (telecommunications device for the deaf) at **1 800 544-5304**. Our office hours are 8 a.m. to 5 p.m.

### Step 1: Winnings information (Complete the following information.)

Date of payment \_\_\_\_/\_\_\_\_/\_\_\_\_ Type of winnings \_\_\_\_\_

Total won \_\_\_\_\_ Illinois Income Tax withheld \_\_\_\_\_

Write the Social Security number (SSN) or federal employer identification number (FEIN), name, and address of the person to whom winnings were made payable.

\_\_\_\_\_  
Taxpayer identification number (SSN or FEIN)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State ZIP

Under penalties of perjury, I declare that to the best of my knowledge and belief the names, addresses, and taxpayer identifying numbers which I have furnished correctly identify me as the recipient of this payment and correctly identify each person entitled to any portion of this payment.

\_\_\_\_\_  
Signature Date

**Note:** Give your completed and signed form to the person who pays you the winnings.

IL-5754 (R-12/05)

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-0045.

### Step 2: Who will receive winnings? (Complete the following information for each person receiving winnings.)

**1**

\_\_\_\_\_  
Taxpayer identification number (SSN or FEIN) Amount won

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State ZIP

**2**

\_\_\_\_\_  
Taxpayer identification number (SSN or FEIN) Amount won

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State ZIP

**3**

\_\_\_\_\_  
Taxpayer identification number (SSN or FEIN) Amount won

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State ZIP



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Taxpayer identification number (SSN or FEIN)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street address

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Name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State ZIP

**2**

\_\_\_\_\_  
Taxpayer identification number (SSN or FEIN) Amount won

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State ZIP

**3**

\_\_\_\_\_  
Taxpayer identification number (SSN or FEIN) Amount won

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State ZIP